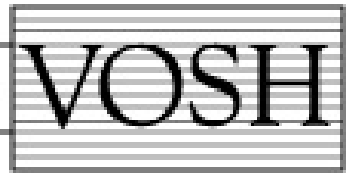


Virginia Occupational Safety and Health



**VOSH PROGRAM DIRECTIVE:** 02-433

**ISSUED:** March 15, 1999

**SUBJECT:** Enforcement Procedures and Scheduling for Occupational Exposure to Tuberculosis

**A. Purpose**

This Program Directive provides uniform procedures and guidelines for conducting inspections and issuing citations for the occupational exposure to tuberculosis.

*This program directive is an internal guideline, not a statutory or regulatory rule, and is intended to provide instructions to VOSH personnel regarding internal operation of the Virginia Occupational Safety and Health Program, and is solely for the benefit of the program. This document is not subject to the Virginia Register Act or the Administrative Process Act; it does not have general application, and is not being enforced as having the force of law.*

**B. Scope**

This instruction applies VOSH-wide.

**C. References**

OSHA Instruction CPL 2.106, Feb. 6, 1996

**D. Cancellation**

Not applicable

**E. Action**

Directors and Compliance managers shall assure that the policies and procedures established in this directive are adhered to in conducting inspections and issuing citations for the occupational exposure to tuberculosis.

**F. Effective Date**

March 15, 1999

**G. Expiration Date**

Not applicable

## **H. Background**

The incidence of tuberculosis in the United States is on the rise. It has increased 14% since 1985. The sector of the population with the highest risk includes those with compromised immune systems -- in particular, those infected with HIV.

Although earlier this decade, efforts to combat tuberculosis had proven to be effective, such efforts are now outstripped by the disease. This heightened presence of TB can be found in many types of work places. These include hospitals, correctional institutions, homeless shelters, nursing homes, and residential care facilities for AIDS patients.

TB cure rates are going down because of new drug-resistant strains. Patients with multi-drug-resistant (MDR) strains sometimes cannot be cured at all. Those that can be cured take much longer to respond to treatment. Under both of these circumstances, there is more chance of exposing others. Since transmission of TB is so easy, this then drives up the number of TB patients. Multi-drug-resistant (MDR) strains of TB can turn up anywhere, at any time. No place is completely safe, due to high travel rates.

In occupational healthcare settings with TB patients, TB exposure risk is particularly high. Whenever a TB patient coughs, sneezes, or even speaks, a worker is at risk. Employers can take precautions, and implement employee precaution.

For a more complete background, please see pages 3-4 of the attached CPL (2.106)

## **I. Procedures**

Please refer to attached OSHA CPL 2.106 (2-9-96) for proper procedures during occupational exposure to TB.

John Mills Barr  
Commissioner

e-Attachment: CPL 2.106, dated February 9, 1996

[http://www.osha.gov/pls/oshaweb/owadisp.show\\_document?p\\_table=DIRECTIVES&p\\_id=1586  
&p\\_text\\_version=FALSE](http://www.osha.gov/pls/oshaweb/owadisp.show_document?p_table=DIRECTIVES&p_id=1586&p_text_version=FALSE)

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